PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  10790536													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			30				· F	RATE		7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			2/7minus 20=		. 11)			S 9=		1	X\$18=	180	
INDEPENDENT CLAIMS			√ minus 3 =		. 6		<b>-</b>	(43=		OR		4.21	
		NDENT CLAIM P					1		<del> </del> -	OR	X86=	450	
								145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								DTAL		OR	TOTAL	12 80	
9-11-0 (Column 1) (Column 2) (Column 3)							SI	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 29	Minus	<b></b> 3	0	=	· X\$ 9=			OR	X\$18=		
	Independent	endent * 8 Minus 8		<b>)</b> .	=	×	43=		OR	X86=			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							45=		OR	+290=		
								TOTAL	<u> </u>		TOTAL		
	•	(Column 1)		(Colum	an 2\	(Column 3)	ADDI	T. FEE	<u> </u>	OR	ADDIT. FEE		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	• •	•	X	9=		OR	X\$18=		
	Independent	•	Minus	***		•	×	13=	·	OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								45 <b>=</b>		OR	+290=		
·								T. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	າກ 2)	(Column 3)			• •		,		
3 L		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA	R/	NTE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		*	XS	9=		OR	X\$18=	•	
	Independent	•	Minus	***		<b>3</b>	X4	3=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2 write 10° in column 3											+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADI										OR ,	TOTAL ODIT. FEE		
		ber Previously Paid					r found in	, the <del>a</del> bt	propriate box	in colu	;mn 1. · .		

Application or Docket Number